

Iowa's Medicaid Program

Community-Based Case
Management

January 13, 2020

Strategy

To identify and address the importance of Case Management.

Getting the right care at the right time and place.



Overview

- What populations are eligible for Case Management?
- How does Community-Based Case Management work?
- Identify the resources that Community-Based Case Management can bring the to the table.



Primary Goal of Case Management

Provide support services for individuals with disabilities to live healthy and safe lives at home and to be a part of their community.



Populations Served

Intellectual Disability

Brain Injury

Health and Disability

Physical Disability



Populations Served

Elderly

AIDS/HIV

Children's Mental Health (CMH)

Habilitation Services (HAB)



Person-Centered Plan





Role of the Case Manager

 Assists in coordinating medical, social, educational, housing needs, transportation, vocational and other necessary services.

Supports an integrated plan of care.



Role of the Case Manager

Securing/managing funding for services

Development, coordinating and monitoring of service goals for the member's health, safety and wellbeing

Navigating the service system to gain access to relevant services

Working with the individual, parents/guardian, other members of the service team to develop a care plan



Determination of Eligibility

 DHS income maintenance worker will review financial eligibility every 12 months.

 IME or MCO will determine Level of Care (LOC) at least every 12 months.



Service Plan

Service plan must be completed, and services authorized, prior to service provision.

The member shall have a service plan approved by the Department which is developed by the interdisciplinary team, in order to be reimbursed for those services.



Amerigroup Iowa LTSS

Community Based Case Management







Iowa Medicaid Enterprise Provider Training 1.13.20

Case Management